

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1		S 21 00
O.I.P.E. CLASSIFIER	MM		
FORMALITY REVIEW	initial	TC826	10 8035-00
RESPONSE FORMALITY REVIEW			07/27/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	10/22/03
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

Best Available Copy